



Public Health

Seattle & King County

HEALTHY PEOPLE. HEALTHY COMMUNITIES.

David Fleming, MD, *Director and Health Officer*

2006 Health Care for the Homeless Network Annual Report & Data Summary

June 2007

Health Care for the Homeless Network

A Community Program of Public Health - Seattle & King County

Community Health Services Division

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City of Seattle

Gregory J. Nickels, *Mayor*



King County

Ron Sims, *Executive*

Acknowledgements

Health Care for the Homeless Network Planning Council (see page 21)

HCHN Contract Partners

Country Doctor Community Health Centers
Community Health Centers of King County
Evergreen Treatment Services
Odessa Brown Children's Clinic
Pioneer Square Clinic – Harborview Medical Center
Puget Sound Neighborhood Health Centers – 45th Street Clinic & Pike Market Medical Clinic
Seattle Indian Health Board
University of Washington Adolescent Medicine
Valley Cities Counseling & Consultation
Salvation Army William Booth Center
YWCA of Seattle-King-Snohomish County

Public Health—Seattle & King County, with particular thanks to:

Downtown Public Health Dental Clinic
Tuberculosis Control Program
Tobacco Prevention Program
Healthy Eating for Healthy Aging
King County Medical Examiner
Epidemiology, Planning, and Evaluation Section
Emergency Preparedness
Public Health Centers – Community Health Services

City of Seattle Human Services Department & City of Seattle Office of Housing

King County Department of Community & Human Services

HCHN Funders and In-Kind Donations 2006

U.S. Department of Health & Human Services, HRSA, Bureau of Primary Health Care
U.S. Department of Housing & Urban Development
City of Seattle
King County
Phoebe W. Haas Charitable Trust
Small Changes (for calendars to give to patients)

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Data Sources:

1. HCHN Database – data from HCH contractors. All contracted staff supported with HCH program funds complete an HCH “encounter form” for each face-to-face visit they have with a homeless person. The information is entered into a database managed by Public Health. A special client code is used across the network that allows us to unduplicate client data. Staff completing the forms include nurses, nurse practitioners, physician assistants, doctors, mental health/substance abuse counselors, case managers, outreach/engagement workers, and Medicaid enrollment specialists.

2. Public Health Signature system. Each time a patient visits a public health center or program, housing status information is collected. Data is retrieved from Public Health’s data and billing system, Signature.

A. Highlights 2006

HCHN Accomplishments: The Public Health Context

HEALTH PROVISION - Assuring Access to Care Through community partnerships

- Contracted with 12 community agencies to improve access to care for homeless people.
- On-site health services & linkages to other services offered in 40+ homeless sites, plus help accessing Medicaid.
- 42,976 visits provided to 7,897 homeless people. HCH staff made 16,585 referrals to other needed services and housing.
- Provided intensive case management for 210 chronic substance abusers (REACH team); 168 of whom maintained or improved housing. Of the 168, 87 entered housing in 2006.
- Sponsored numerous trainings to improve quality of care.

Through Public Health Centers

- 96,413 visits to 21,438 homeless & formerly homeless
- Includes 3,037 dental visits at Downtown Public Health for homeless & recently housed -- compared to 798 visits in 2003

HEALTH PROTECTION

Supported 32 homeless agency sites in meeting communicable disease standards & TB prevention guidelines.

Over 397 homeless agency staff trained in communicable disease prevention in the shelter setting

Provided over 800 flu shots in selected homeless shelters

Facilitated community/public health task force that developed & issued Pandemic Flu Planning Guidance for homeless serving programs.

HEALTH PROMOTION

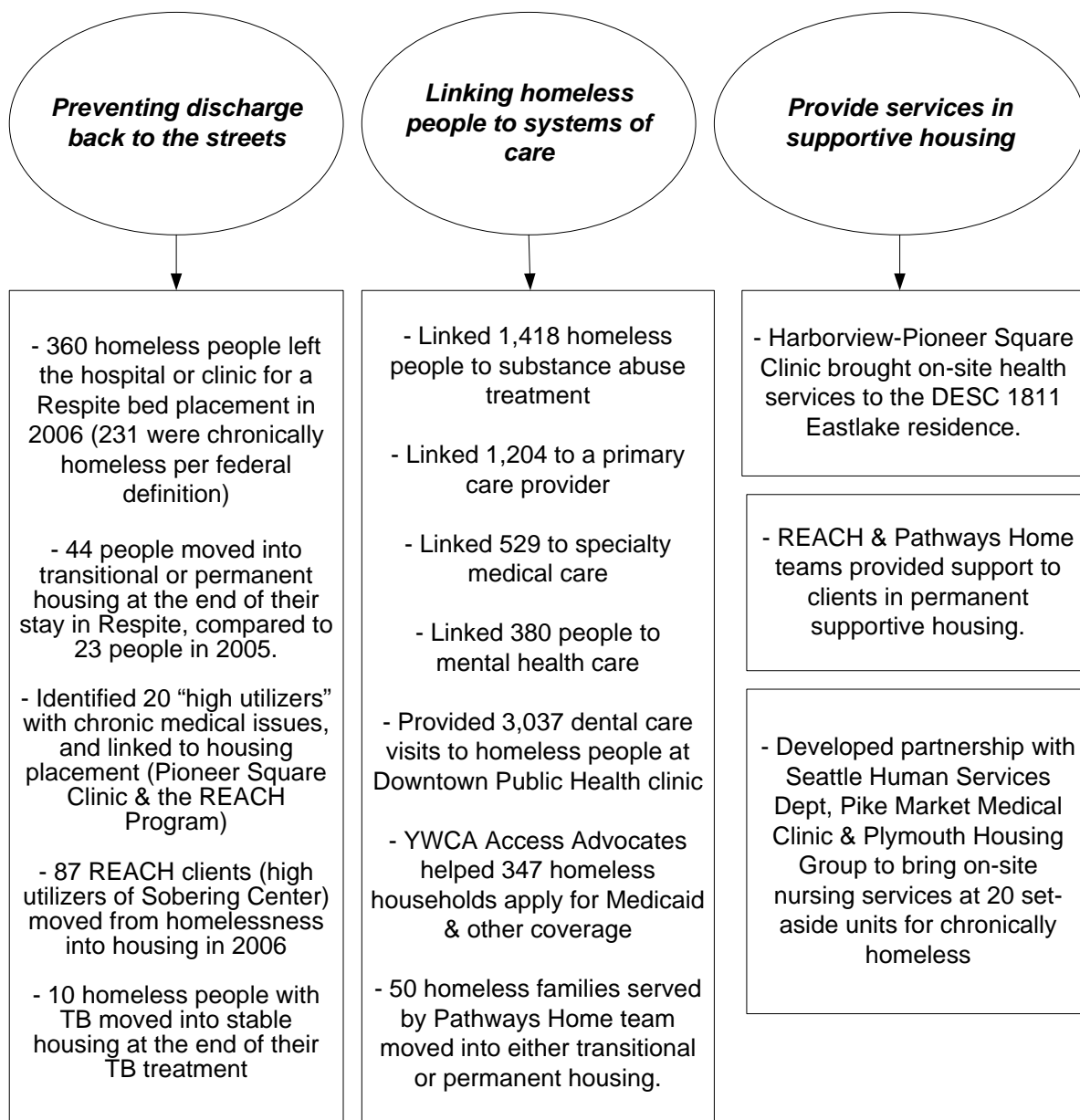
- With Tobacco Prevention program, trained 100 staff in homeless service agencies on how to support clients who want to quit. Several sites began providing their own support groups, and all have reported changes in people quitting or cutting down their use.

- Developed a partnership with the Healthy Eating for Healthy Aging program of Public Health to provide on-site cooking and nutrition education classes for residents in eight supportive housing programs.

- Of homeless patients with an identified chronic health condition, 41% set a self-management goal (goal was 25%)

HCHN: The Ten Year Plan to End Homelessness Context

Health Care for the Homeless Network and its partners continued to align their work with the *Ten Year Plan to End Homelessness in King County*. Not only did Network partners continue the core work of bringing needed health care to homeless people in shelters and day centers, we increased our partnerships with supportive housing programs so that tenants—even those with the most complex health issues—could improve their health and maintain residency.



"I have no money to pay for my dental work that's needed. I'm grateful for such a place as this one!"

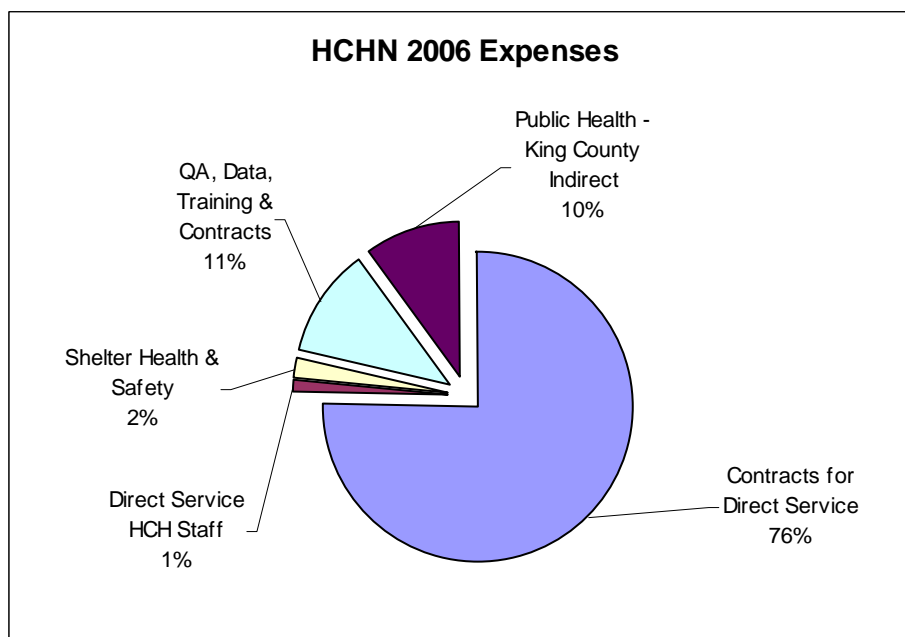
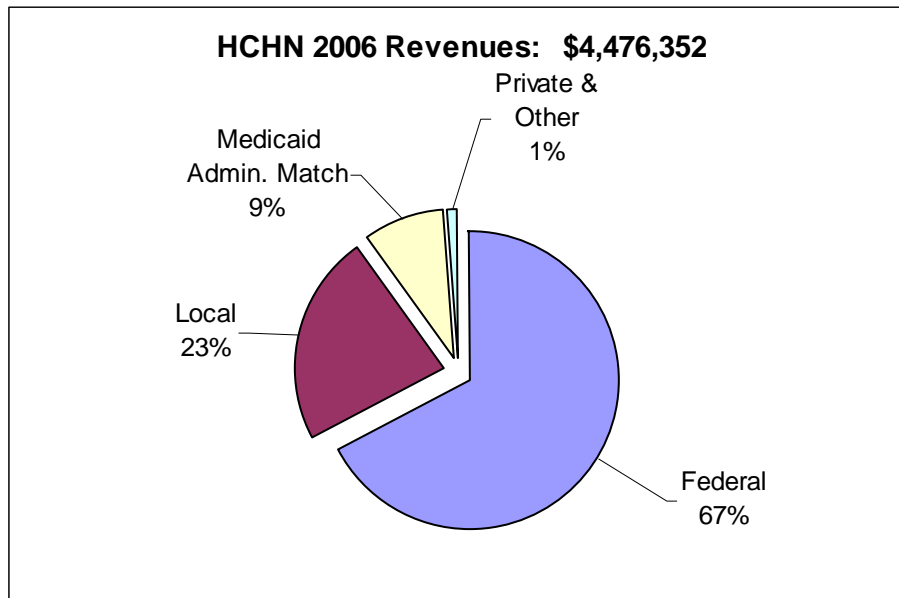
- A homeless client who accessed dental care at Downtown Public Health Center.

Other 2006 Highlights

- Sponsored a “**Ten Year Plan Dialogue**” event that brought together HCH care providers with leadership of the Ten Year Plan to End Homelessness to share information and discuss ways to work collaboratively to meet the plan’s goals. (January)
- Co-sponsored “**Documenting Disability Training for Medical Providers**” – attended by over 40 providers who work with homeless people. With National Health Care for the Homeless Council. (March)
- Led a work group that developed and issued “**An Influenza Planning Guide For Homeless Service and Housing Providers.**” (December)
- Issued 2005 **report on homeless deaths**. In 2005, the King County Medical Examiner identified 94 people who died while homeless. (December)
- Analyzed results of Public Health **patient satisfaction survey**, which showed that homeless patients were as satisfied with care as those who were housed. From January 2005 – September 2006, the average score was 4.5 on scale of 1-5 where 5 is highest satisfaction.
- Completed the **peer chart review** process within HCH. Sixty-five providers representing all the disciplines of the network participated in the process, reviewing 252 individual client health records. The purpose of the review is to assure clinical care is appropriate for the special needs of the patient and is documented appropriately. The review also identifies changing clinical practice needs, and recognizes the strengths of providers and the excellent clinical care delivered to patients by providers and agency partners.
- Held **three focus groups** with homeless and recently homeless people. Consumer representatives who serve on the HCH Planning Council helped facilitate the sessions.
- **Eastgate Public Health Center** partnered to provide access to care for **homeless youth** using Friends of Youth “The Landing” shelter in Bellevue.

B. Program Resources 2006

The HCHN program budget for 2006 was \$4.5 million. Most revenue is federal – a combination of Health & Human Services (HHS) and Housing & Urban Development (HUD). The HUD funds are designated for two specific projects – the Pathways Home case management for families, and the Medical Respite program. HHS funds are allocated according to the annual application and plan submitted to HHS-Bureau of Primary Health Care.



C. HCHN Major Service Sites 2006

Through contract partnerships with health, mental health, substance abuse, and other organizations, HCHN supports geographic-based teams of nurses, counselors, and Medicaid eligibility specialists that provide assistance in selected homeless sites throughout King County. Due to limited resources, services vary by site and are not available in all homeless programs.

Sites with regular health services supported—in whole or in part, depending on the site—by Health Care for the Homeless Network:

Single Adults

Chief Seattle Club	Dutch Shisler Sobering Support Center
Compass Center & Compass Cascade	St. Martin de Porres Shelter
Downtown Emergency Service Center	Salvation Army William Booth Center
Downtown YWCA	Katherine's House
Second Avenue Clinic (at Needle Exchange)	Plymouth on Stewart (partial year)
YWCA Angeline's	
Third Avenue Center (at YWCA Opportunity Place)	

Unattached Youth

45th Street Clinic (Puget Sound Neighborhood Health Centers)
County Doctor Youth Clinic (through UW Adolescent Medicine clinic)
YouthCare Orion Center
The Landing shelter

Families

Broadview Shelter	New Beginnings
Catherine Booth House – Salvation Army	Avondale Park
Providence Hospitality House	Sacred Heart
Domestic Abuse Women's Network	Family & Adult Service Center
Eastside Domestic Violence Program	Morningsong Family Support Center
First Place School	Seattle Emergency Housing Services (YWCA)
Hopelink sites	Union Gospel Mission Family Shelter (partial yr)
Jubilee House (partial year)	South King County Multi-Service Center sites
YWCA family sites countywide	

Certain visits also take place in the client's home (once housed), streets, encampments, and other sites.

This report also includes limited data homeless people served through Public Health centers.

D. Summary Data

	Contracted	Public Health	Total
Total Encounters	42,976	53,437	96,413
Unduplicated Clients	7,897	13,541	21,438

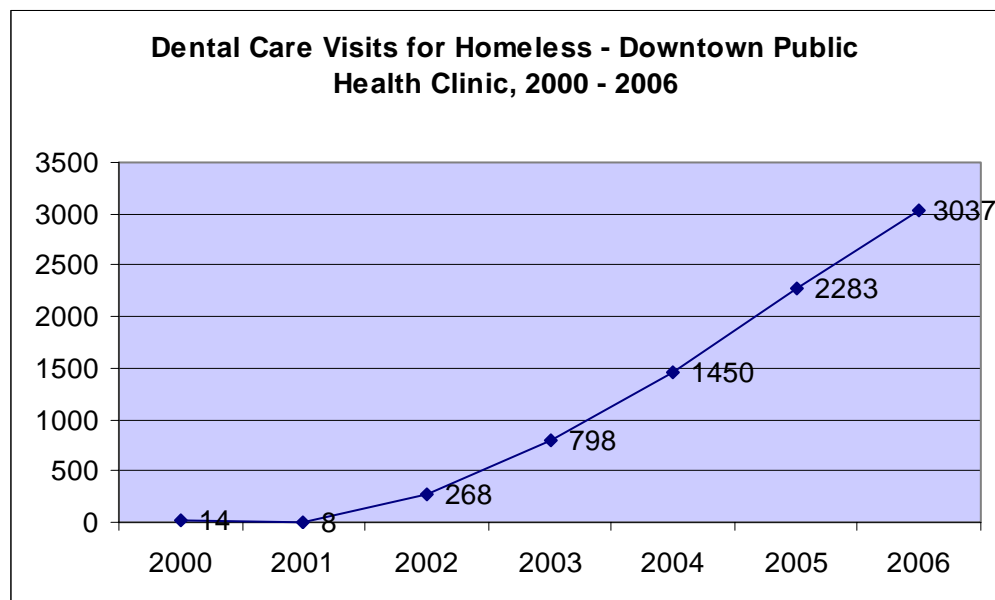
	HCHN Contracted		Public Health Sites		TOTAL	
	Number	Percent	Number	Percent	Number	Percent
AGE						
0-5	373	5%	3,119	23%	3,492	16%
6 through 10	247	3%	252	2%	499	2%
11 through 13	105	1%	101	1%	206	1%
14 through 17	341	4%	509	4%	850	4%
18 through 24	919	12%	3,180	23%	4,099	19%
25 through 34	1,056	13%	2,814	21%	3,870	18%
35 through 59	4,302	54%	3,154	23%	7,456	35%
60 through 74	514	7%	345	3%	859	4%
75 through 84	37	0%	50	0%	87	0%
85+	3	0%	17	0%	20	0%
Total	7,897	100%	13,541	100%	21,438	100%
RACE/ETHNICITY						
Asian/Pacific Islander	318	4%	1,184	9%	1,502	7%
Black/African American	2,014	26%	2,973	22%	4,987	23%
American Indian/Alaska Native	660	8%	462	3%	1,122	5%
Hispanic or Latino	926	12%	2,575	19%	3,501	16%
Multi-racial	430	5%	653	5%	1,083	5%
<i>People of color total</i>	<i>4,348</i>	<i>55%</i>	<i>7,847</i>	<i>58%</i>	<i>12,195</i>	<i>57%</i>
White	3,483	44%	4,877	36%	8,360	39%
Race unknown or not reported	66	1%	817	6%	883	4%
Total - all race	7,897	100%	13,541	100%	21,438	100%
GENDER *						
Male	4,656	59%	5,130	38%	9,786	46%
Female	3,241	41%	8,411	62%	11,652	54%
Total	7,897	100%	13,541	100%	21,438	100%
HOUSEHOLD TYPE/SOCIAL UNIT						
Family	1,721	22%			1,721	22%
Individual	5,303	67%			5,303	67%
Unattached Youth	832	11%			832	11%
Unknown	41	1%			41	1%
Total	7,897	100%			7,897	100%
HOUSING STATUS						
Street	1,077	14%	902	7%	1,979	9%
Shelter	2,836	36%	2,259	17%	5,095	24%
Transitional	765	10%	1,288	10%	2,053	10%
Doubled Up	354	4%	6,108	45%	6,462	30%
Other	444	6%	2,444	18%	2,888	13%
Unknown	2,421	31%	540	4%	2,961	14%
Total	7,897	100%	13,541	100%	21,438	100%
INSURANCE						
Medicaid	2,766	35%	7,813	58%	10,579	49%
No insurance or unknown	3,863	49%	5,418	40%	9,281	43%
Other Public Insurance	463	6%	31	0%	494	2%
Medicare	639	8%	227	2%	866	4%
Private Insurance	166	2%	52	0%	218	1%
Total	7,897	100%	13,541	100%	21,438	100%

* Gender: HCHN contracted data includes transgendered -- 9 male to female and 4 female to male

Services for Homeless People in Public Health Centers – 2006

	# Visits to Homeless	% of Total Visits at this Site
Downtown Public Health (offers primary care)	9,907	27%
Tuberculosis (TB) Control Program	2,258	18%
Sexually Transmitted Disease (STD) Program	2,827	18%
Auburn Public Health	4,887	21%
Columbia Public Health (offers primary care)	3,990	7%
Renton Public Health	4,284	9%
Federal Way Public Health	4,203	9%
Kent Public Health (primary care at teen clinic)	4,660	14%
White Center Public Health	3,966	12%
Eastgate Public Health (offers primary care)	2,931	6%
North Public Health (offers primary care)	4,858	11%
Northshore Public Health	1,591	5%

Expanding access to dental care. In 2005, Health Care for the Homeless Network implemented a federal oral health care expansion grant at Downtown Public Health dental clinic, partnering with homeless-serving programs to engage clients in needed care.



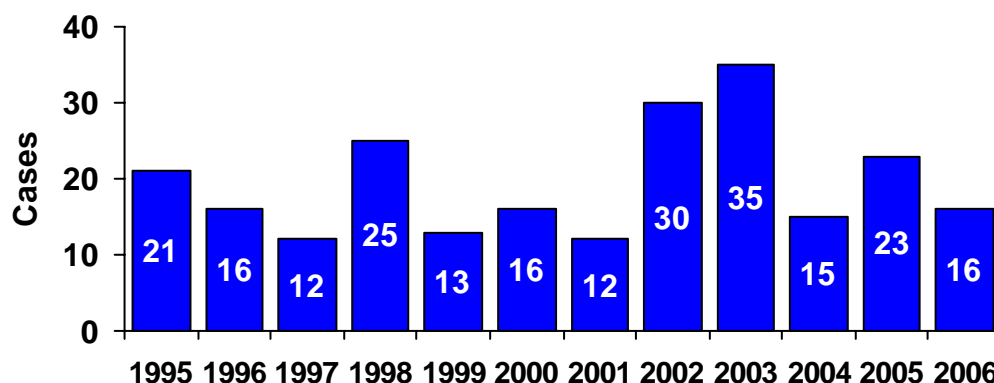
Health & Safety Technical Assistance for Homeless Programs

Twenty four (24) Seattle-funded homeless shelters responded to a survey from Health Care for the Homeless Network (HCHN) regarding the usefulness of technical assistance services provided by HCHN public health nurses Heather Barr and Marcia Stone in 2006. Overall, the shelters are highly satisfied, and report numerous specific behavior changes.

- 75% indicated they have now installed hand sanitizer dispensers in the shelter.
- 81% have increased their amount of hand washing.
- 81% have a standard precautions policy in place.
- 54% modified the way they sanitize surfaces.
- 50% are planning to add questions about communicable disease symptoms to the shelter intake form.
- 82% of responding agencies indicated they have made changes at the site as a result of the TB assessment process, and they itemized such as changes as implementing annual staff TB testing and training, new staff orientation, and creation of agency TB policies.
- 86% rated the overall health & safety assessment process as either outstanding or very useful.

Comments included: “We have not experienced any serious outbreaks of illness at [our shelter]. We are profoundly grateful to have HCHN as a resource. . . always culturally appropriate...great support around bug issues...we are arranging for CPR and first aid classes....we are trying to informally teach clients the new way to cover a cough or sneeze...we keep hand sanitizer everywhere...we are more mindful of our ventilation. . . we keep a “cough log” at the desk to monitor clients with ongoing coughs.”

Number of Homeless People with Tuberculosis – King County, 1995 – 2006



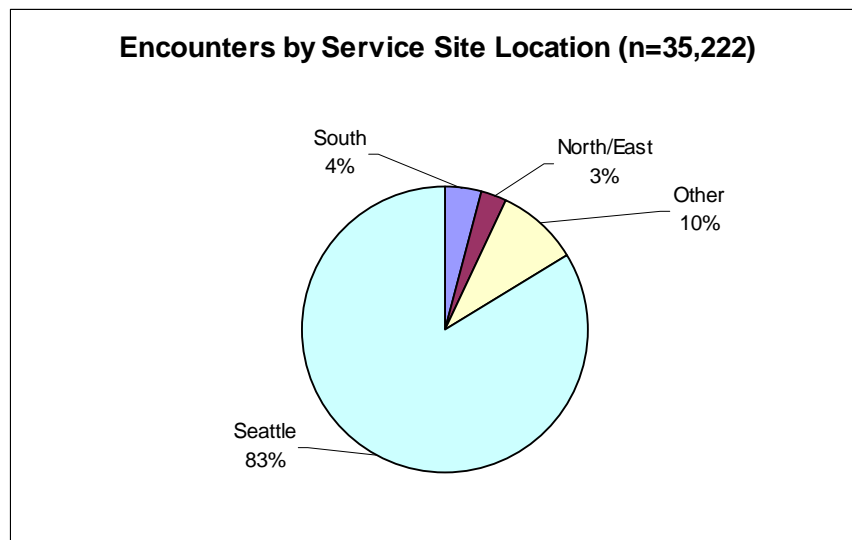
Homeless Clients Seen Through HCH Contractors

Services provided by HCH contract partners are provided primarily in community sites such as shelters, day centers, housing programs, and in homeless-friendly clinics located in or near homeless service programs.

Geographic Location

Data from HCH Contractors only

In 2006, 83% of all encounters took place at sites in the City of Seattle. This reflects both the distribution of the homeless population, and the enhanced services in Seattle due to financial support for programs in Seattle.



Veteran Status

Data from HCH Contractors only

HCH provided some type of service to 446 unduplicated homeless veterans in 2006.

- Of the 3,654 total single adults served by HCH in 2006, 423 or **12%** were veterans.
- Of the 446 veterans, 100 or 22% were Vietnam era.

Gender

Male	419	94%
Female	27	6%

Social Unit

Individual	423	95%
Family	22	5%
Unknown	1	--
	446	100%

Race

American Indian/Alaska Native	54	12%
Asian/Pacific Islander	5	1%
Black	113	25%
Hispanic or Latino	19	4%
Multi-racial	13	3%
White	240	54%
Race Unknown/Not Reported	2	1%
	446	100%

Most common service sites at which HCH staff encountered homeless veterans (Individuals may be listed multiple times)

of veterans served by HCH
staff working in these
locations (*does not reflect
total vets at the given site*)

Downtown Emergency Services Center (DESC)	116
St. Martin de Porres Shelter	95
REACH Team / Sobering Center	53
William Booth - Respite Program	48
The Compass Center	34
Street, Alleys, Parks etc.	31
Third Avenue Center (clinic next to Angeline's)	28
Chief Seattle Club	22
<i>All other HCH sites</i>	<i>10 or fewer vets per site</i>

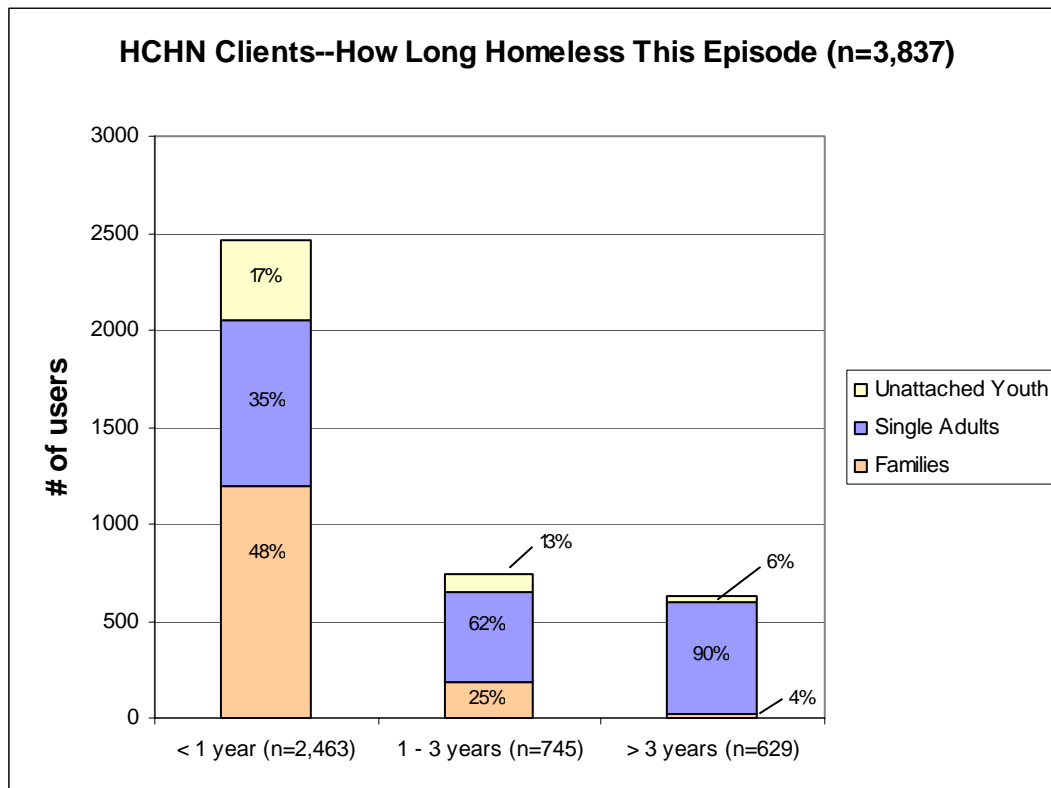
Health problems for which veterans were seen:

Body System	# of Visits
Substance Use Related	1201
Other	655
Mental Health	560
Skin Conditions	486
Cardiovascular	446
Respiratory	274
Musculoskeletal	246
Endocrine	214
Gastrointestinal	163
Neurological	145
No Problem/Screening	127
Kidney	22
Genitourinary	15
Nutrition	12
Disability	10
Immune	8

Length of Time Homeless

Data from HCH Contractors only

For 3,837 HCH clients, we collected information on how long they had been homeless that episode. Sixty-four percent (64%) had been homeless for less than a year, and 36% had been homeless for a year or more.



For this episode:

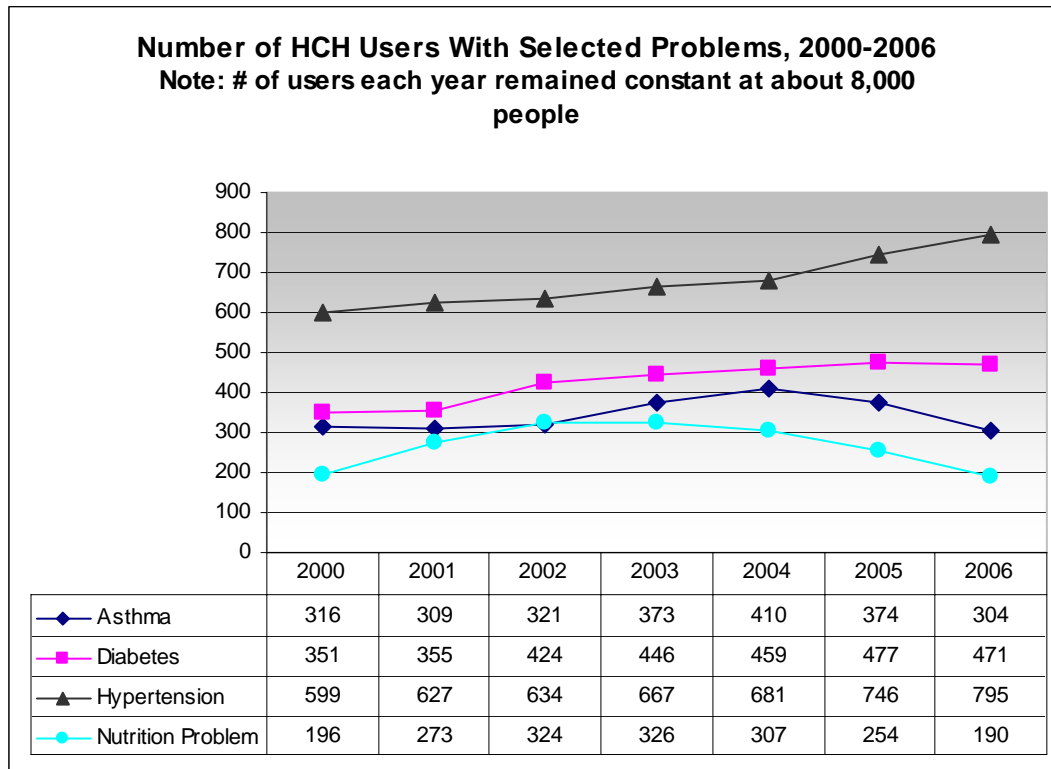
	2005	2006
n=	3,251	3,837
Homeless less than 1 year	66%	64%
Homeless from 1 to 3 years	19%	20%
Homeless 3 years +	14%	16%
	100%	100%

Chronic Health Conditions

Data from HCH Contractors only

The most common chronic health conditions experienced by HCH patients are mental health and/or substance abuse disorders, and cardiovascular conditions. Among the mental health conditions, depression is the most common:

Shown below are the number of HCH patients with selected chronic health conditions over time.



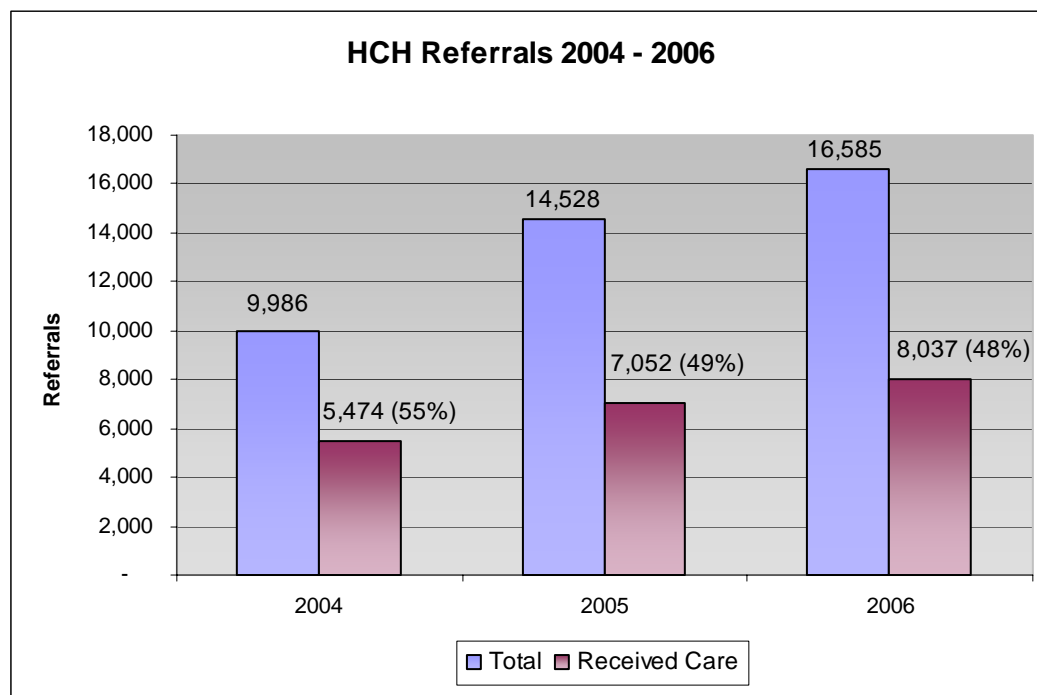
Referrals

Data from HCH Contractors only

When an HCHN provider sees a homeless individual and makes a referral for that client to another service, this is indicated on the encounter form. If the HCHN provider later knows whether the client followed through or not, the information is updated to indicate whether the client received care. The disposition of many referrals is, unfortunately, unknown.

We know that, at a minimum, about half of all referrals made by HCHN providers resulted in care actually being received by the client. The total number of referrals made has been rising from 2004-2006, perhaps reflecting better reporting of referrals made & completed by HCH staff.

	2004	2005	2006
Total Referrals Recorded by HCH Staff	9,982	14,528	16,585
Known to Have Received Care	5,474	7,052	8,037
% Received Care	55%	49%	48%



	# of Referrals Made	# Care Received	% Care Received
Over half known to have received care			
Social Services Agency	3,307	2,257	68%
Specialty Medical Care	845	529	63%
Public Health - TB Control Program	43	26	60%
Chemical Dependency Treatment	2,815	1,418	50%
Less than half known to have received care			
Hospital/Emergency Room/Urgent Care	633	308	49%
Vision Services	324	149	46%
Birth to 3/Special Education	19	8	42%
Primary Care Provider/Services	2,752	1,204	44%
Cognitive Skills Evaluation	17	7	41%
Community Mental Health/Counseling Services	985	380	39%
Education Services	111	39	35%
DSHS	787	274	35%
Nutrition Services (includes WIC)	33	11	33%
Housing	1,685	543	32%
Dental Provider	551	173	31%
Employment/Vocational Services	168	43	26%

2006 Health Problems: Of HCH Clients Seen in Community Sites

Data from HCH Contractors only

Health Problem Group	Adults in Families	% with this problem	Children in Families	% with this problem	Single Adult Females	% with this problem	Single Adult Males	% with this problem	Youth	% with this problem	Unkwn	TOTAL	%
Cardiovascular	70	7%	6	1%	208	13%	682	19%		0%	3	969	12%
Dental	51	5%		0%	42	3%	4	0%	2	0%		99	1%
Disability	20	2%	7	1%	22	1%	30	1%	3	0%		82	1%
Endocrine	40	4%	2	0%	117	7%	359	10%	8	1%	8	534	7%
Gastrointestinal	26	3%	9	1%	79	5%	353	10%	32	4%	1	500	6%
Genitourinary	32	3%	8	1%	131	8%	114	3%	120	14%	2	407	5%
Health Maintenance	46	5%	179	23%	23	1%	1	0%	176	21%	1	427	5%
Immune	1	0%		0%	5	0%	22	1%	2	0%		30	0%
Infectious Disease		0%	1	0%	2	0%	3	0%		0%		6	0%
Kidney	6	1%		0%	11	1%	36	1%	3	0%	1	57	1%
Musculoskeletal	95	10%	36	5%	243	15%	596	16%	174	21%	5	1,150	15%
Neurological	16	2%	9	1%	43	3%	171	5%	10	1%	1	250	3%
Screening	284	30%	256	33%	282	17%	540	15%	373	45%	7	1,743	22%
Nutrition	34	4%	25	3%	43	3%	81	2%	6	1%	1	190	2%
Respiratory	64	7%	82	11%	284	17%	621	17%	191	23%	6	1,249	16%
Skin	43	5%	55	7%	337	20%	870	24%	165	20%	1	1,472	19%
Social Issue	684	73%	459	59%	570	35%	826	23%	440	53%	12	2,993	38%
Substance Abuse													
Related	162	17%	4	1%	345	21%	830	23%	73	9%	1	1,416	18%
Mental Health	347	37%	102	13%	492	30%	649	18%	147	18%	15	1,753	22%
Anxiety	156	17%	26	3%	154	9%	123	3%	55	7%	8	522	7%
Depression	239	25%	42	5%	330	20%	417	11%	81	10%	6	1,116	14%
Psychoses	15	2%	1	0%	87	5%	100	3%	13	2%	1	217	3%
Mental Health-Other	143	15%	66	8%	137	8%	246	7%	50	6%	7	649	8%
Sign/Symptom	542	58%	478	61%	910	55%	1,757	48%	421	51%	13	4,124	52%
Other	303	32%	197	25%	368	22%	909	25%	276	33%	8	2,062	26%

Signs & Symptoms 2006

Sign/Symptom	Adults in Families	Children in Families	Single Adult Females	Single Adult Males	Unattached Youth	Unknown	TOTAL	TOTAL RANK
Abdominal Discomfort	29	14	48	111	31	1	234	
Alcohol on Breath (REACH)			27	101			128	
Amenorrhea	5		2		7		14	
Chest Pain	6		29	74	12	2	123	
Cognition-Altered				3			3	
Constipation	11	6	18	27	12		74	
Cough	29	25	68	195	64	1	382	8
Dehydration	2		4	20	1		27	
Dental Problem	102	95	53	129	95	2	476	6
Developmental Delay		23	1	3			27	
Developmental Issue (Access Only)	3		1				4	
Diarrhea	9	19	34	85	11	1	159	
Dysmenorrhea	14	2	14		11		41	
Dysphoria	61	9	72	37	22		201	
Dysuria	8	4	6	10	11		39	
Emotional/Adjustment/Situational	324	150	196	169	100	1	940	1
Encopresis		2		1			3	
Exposure to heat/cold			5	10			15	
Fatigue	101	17	82	160	46		406	7
Fever	5	20	22	58	8		113	
Growth Problem/Failure to Thrive	2	10					12	
Headache	51	20	70	98	46		285	10
Hearing Loss	2	4	5	9	1	1	22	
Hygiene - Poor (REACH)			25	89			114	
Incontinence/Enuresis	4	1	20	15			40	
Joint Pain	6	1	68	150	12		237	
Learning Disorder/Delay	2	13		1			16	
Memory Impairment (REACH)			24	55			79	

Sign/Symptom	Adults in Families	Children in Families	Single Adult Females	Single Adult Males	Unattached Youth	Unknown	TOTAL	TOTAL RANK
Nausea/Vomiting	31	26	42	60	26		185	
Other sign or symptoms	123	107	208	396	73	1	908	2
Pain	125	36	155	503	40		859	3
Physical Trauma	2	5	18	33	4	1	63	
Pruritis	2		38	82	28		150	
Rash	31	68	5	22	3		129	
Skin Wound	34	47	167	505	45		798	4
Sleep Disturbance	113	19	97	95	51	3	378	9
Sore Throat	11	12	20	50	41		134	
Upper Respiratory Symptoms	65	108	112	253	31	1	570	5
Vision (abnormal)	2	8	8	38	15		71	
Vision Issue (Access only)	43		62	1			106	

Note: (REACH) indicates the choice was available only on the encounter form used by the REACH case management team for chronic public inebriates. (Access Only) means the choice was only available to the access staff who work with HCH clients on medical coverage.

Health Care for the Homeless Network Advisory Planning Council

Carole Antoncich, Homeless Housing Coordinator, King County Department of Community and Human Services

Maureen Brown, MD, Swedish Family Practice Residency Program – Downtown Public Health Center

Mark Dalton, Administrator, Washington State Dept. of Social and Health Services, Belltown Community Service Office

Jerry DeGriek, Public Health Policy Manager, City of Seattle Human Services Department

Sinan Demirel, Executive Director, Rising Out of the Shadows

Charissa Fotinos, MD, Medical Director, Public Health - Seattle & King County

Jenine Grey, Program Manager, Chief Seattle Club

Ronald L. Johnson, Consumer Representative

MJ Kiser, Program Director, Compass Center

Sandy Olson, Clinic Practice Manager, Pioneer Square Clinic Harborview Medical Center

Arthur Padilla, Director, Multifaith Works

Linda Rasmussen, Regional Director, South King County, YWCA of Seattle, King County & Snohomish County

Eva Ruiz, Community Member

Sheila Sebron, Consumer Representative

Linda Weedman, Senior Director, Housing & Related Services, YWCA of Seattle, King County & Snohomish County

Alfred White, Consumer Representative

Charles Winrow, Consumer Representative